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0010/PTO
Rev. 6/95

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration
Submitted
with Initial Filing

OR

☒ Declaration
Submitted after
Initial Filing

Attorney Docket
Number

C 2220 COGG

First Named
Inventor

BIRNBRICH, Paul

COMPLETE IF KNOWN

Application Number

09/782,366

Filing Date

02/13/2001

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:
My residence, post office address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below)
of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HYDROPHILIC ADDITIVE

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

02/13/2001

as United States Application Number or PCT International

Application Number

09/782,366

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any
amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's
certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below
and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application
having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		Certified Copy Attached?	
			YES	NO	YES	NO
100 155 54.5	DE	03/30/2000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you
are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED
FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED
WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN
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Rose A. Stowe Rose A. Stowe
(SIGNATURE)
August 14, 2001
(DATE OF SIGNATURE)

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application
NumberPCT Parent
NumberParent Filing Date
(MM/DD/YYYY)Parent Patent Number
(if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:



Firm Name

OR



List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
John E. Drach	32,891	Aaron R. Ettelman	42,516
Steven J. Trzaska	36,296	Henry E. Millson, Jr.	18,980

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all
correspondence to:Customer
Number or label**23657**

OR

Fill in correspondence
address below

Name John E. Drach
Address
Address
City Telephone 610-278-4925 State Fax 610-278-6548
Country

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsignedGiven
Name**Paul**Middle
InitialFamily
Name**Bimbrich**Suffix
e.g. Jr.Inventor's
Signature*Paul E. Drach*

Date

02/10/01

Residence.
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Zip

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GermanyApplicant
Authority

Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental SheetName of Additional Joint Inventor, if any: ☐ A petition has been filed for this unsigned inventor

Given Name	Raymond	Middle Initial		Family Name	Mathis	Suffix e.g. Jr.	
Inventor's Signature	<i>Raymond Mathis</i>					Date	02/10/01

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Post Office Address

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Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this unsigned inventor

Given Name	Christine	Middle Initial		Family Name	Wild	Suffix e.g. Jr.	
Inventor's Signature	<i>Christine Wild</i>					Date	02/10/01

Residence: City	Hilden	State		Country	Germany	Citizenship	Germany
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Post Office Address

City	40724 Hilden	State		Zip		Country	Germany	Applicant Authority	
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Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this unsigned inventor

Given Name	Petra	Middle Initial		Family Name	Padurschel	Suffix e.g. Jr.	
Inventor's Signature	<i>Petra Padurschel</i>					Date	02/10/01

Residence: City	Grevenbroich	State		Country	Germany	Citizenship	Germany
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Post Office Address

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Name of Additional Joint Inventor, if any: ☐ A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature						Date	

Residence: City		State		Country		Citizenship	
Post Office Address							

Post Office Address

City		State		Zip		Country		Applicant Authority	
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☐ Additional inventors are being named on supplemental sheet(s) attached hereto